

(1) PLACE OF BIRTH

County of Sumter
 Township of Providence
 or
 Inc. Town of
 or
 City of

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
 Bureau of Vital Statistics
 State Board of Health

File No.—For State Registrar Only

87622

Registration District No. 4105 Registered No. 145
 (For use of Local Registrar)

City of (No. St.; Ward)
 (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Marquite Williams (If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL <u>girl</u>	(4) Twin or Triplet?	(5) Number in order of birth	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Nov 24 1916</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME Henry Williams
 (9) PRESENT POSTOFFICE OF FATHER Dazell S. C.
 (10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 25
 (Years)
 (12) BIRTHPLACE S. C.
 (13) OCCUPATION Farmer
 (20) Number of children born to mother, including present birth 19

MOTHER.

(14) NAME BEFORE MARRIAGE Marquite Richbow
 (15) PRESENT POSTOFFICE OF MOTHER Dazell S. C.
 (16) COLOR OR RACE colored (17) AGE AT LAST BIRTHDAY 27
 (Years)
 (18) BIRTHPLACE S. C.
 (19) OCCUPATION Domestic
 (21) Number of children of this mother now living, including present birth 17

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was alive at 10 P.M.
 on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Henry Mark Williams
 (24) State whether Physician or Midwife Physician (25) Address of Physician or Midwife Dazell S. C.

Given name added from a supplemental report

(26) Witness Mrs. Eva Bursette
 (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Dec-2 1916 (28) B. McLaughlin
 Local Registrar.

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

MARGIN RESERVED FOR INDEXING

DEPARTMENT OF COLUMBIA, COLUMBIA, S. C.